







# ASPIRES Evidence Briefing Note: Emerging Learning to Inform DREAMS

### TASK DESCRIPTION

USAID/Tanzania and USAID/Zimbabwe requested related evidence briefs from ASPIRES. Tanzania was interested in concise information to inform its work under the DREAMS partnership, specifically, what evidence exists about economic strengthening (ES) interventions associated with **good outcomes** for AGYW, what combination(s) of ES interventions are associated with good outcomes, and what evidence there is about **layering of interventions**. USAID/Zimbabwe requested a brief addressing the evidence for layering health interventions and economic growth efforts. Based on our

knowledge of the existing evidence base, ASPIRES believes these requests can be effectively addressed in a single brief.

#### **METHODS**

This note draws on existing literature and evidence reviews, recent resources identified through a 2019 online literature search and ASPIRES research and technical assistance.

- Search strings used for the online literature search included: layering AND "health interventions" AND economic AND outcomes
- orphans vulnerable children OR OVC AND layering AND programming AND guid?
- "economic strengthening" AND HIV AND prevention AND interventions AND (impact OR outcomes) AND ("context analysis" OR matrix OR "integrated programming" OR "integrated interventions")
- economic strengthening AND prevention AND DREAMS

Other key words/phrases used to identify potential evidence for layering interventions were: "multiple interventions", "multiple services", matrix, levels, "integrated programming", "integrated interventions", "combination prevention",

saturation, "layered approach", "layered prevention", "multi-sectoral integrated approach"

### **Key points**

- Cash transfers, education support and food aid improve economic well-being and are linked to reduction of AGYW HIV risk behaviors.
- Youth savings groups may support access to health care, reduced sexual risk-taking behavior, improved psychosocial well-being and greater socioeconomic empowerment of girls.
- Financial education has demonstrated positive effects on spending, risk preferences, and saving behavior and demonstrates value related to HIV- and selfefficacy-related outcomes.
- Combination approaches hold promise, but there is more to learn about how components work together. Programs and researchers need to disaggregate program participant, component and setting data more.

### SUMMARY OF FINDINGS FROM THE LITERATURE

The US Government's December 2018 description of the DREAMS core package of interventions (Saul et al. 2018) outlines the evidence-based interventions that are intended to support its outputs, outcomes and impact. Economic strengthening interventions incorporated in the package include

education subsidies or other social protection interventions, combination socioeconomic approaches and group savings leveraged under country OVC programs. The DREAMS core package description references the evidence base used to design the package and cites program examples, but does not describe the evidence base for the ES interventions it includes in the package. This brief goes into more detail to describe evidence related to specific ES interventions that may be used as part of a DREAMS program, to better articulate what is currently known about what works in combined interventions. It should be noted that research supported by the Bill and Melinda Gates Foundation in Kenya, South Africa and Zimbabwe is expected to be reported near or after the end of the ASPIRES project.¹ This Gates-supported research is intended to include examination of pathways through which DREAMS affect the health, education and social well-being of AGYW and descriptive information about what was implemented and how.

Provision interventions (cash transfers, education support and food aid) show positive effects in terms of reduction of risk behaviors. Most research on ES in HIV prevention has focused on provision interventions that directly provide basic needs and target destitute households (Swann 2018). Swann's (2018) evidence review of ES for HIV prevention and risk reduction for ASPIRES reported decreases in HIV risk behaviors associated with: conditional cash transfers (14 studies, 13 focused assessed outcomes for adolescents, 6 focused on the South African Child Support Grant and/or Foster Care Grant), unconditional cash transfers (13 studies, 7 focused on adolescents) and education support (10 studies, all focused on adolescents). The effects of unconditional cash transfers were greater for girls than boys. The review also found that food aid in combination with other interventions may also help reduce risk, particularly among HIV-negative adolescent girls and young women (Swann 2018). A study on cash transfers, young women's economic well-being and HIV risk (Kilburn et al. 2019) examined cash transfers conditioned on school attendance, which were made to young women and their families. It found significant effects on: economic well-being for young women recipients, particularly for those from the poorest families; improved psychosocial well-being of young women from the poorest families; improved food security and reduced likelihood of borrowing money. Taken together, this body of evidence points to a link from increased economic resources to improved well-being that supports young women in avoiding economically driven sexual behaviors that increase their risk of HIV.

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<sup>&</sup>lt;sup>1</sup> See DREAMS Impact Evaluation landing page at <a href="https://www.lshtm.ac.uk/research/centres-projects-groups/dreams">https://www.lshtm.ac.uk/research/centres-projects-groups/dreams</a>).

Youth savings, in combination with other interventions, show positive effects in terms of asset building, psychosocial well-being and empowerment and reduction of risk behaviors. Youth savings interventions often take place in combination with other interventions. Studies on youth savings demonstrate that many young people have the capacity to save. Meaux's literature review of community-based microfinance for orphans and vulnerable children identified 10 studies indicating that, in addition to helping youth develop and control assets, group savings may support access to health care, reduced sexual risk-taking behavior, improved psychosocial well-being and greater socio-economic empowerment of girls (Meaux 2016).

The need for careful consideration of combination interventions for vulnerable AGYW is highlighted by a study by Erulkar and Chong (2005) on the TRY project in Kenya. They found a number of positive effects from the intervention, which combined savings-led microcredit, business skills, life skills, reproductive health and mentoring. The study found greater effects on economic indicators and gender attitudes among participating girls as compared with

# Box 1. Recommendations from a review of girls' groups and girls' savings groups

- Track the number of sessions participants attend and dropout and graduation rates to improve reporting, learn what works, and help ensure consistent participation.
- Interview AGYW who drop out of groups to understand reasons.
- Develop a theory of change for groups that clarifies measurable changes sought through group participation and time and degree of exposure needed achieve them.
- Conduct pre/post assessments of participants to measure the changes desired as a result of group participation.

(do Nascimento, Settergren, and Harris-Sapp 2018)

the control, but noted that both groups saw declines from baseline in ability to refuse sex and condom use at last sex (Erulkar and Chong 2005). These findings may point to larger social issues related to gender norms that need to be addressed through a community intervention in order for girls to exercise greater control over their sexual health.

### Financial literacy/financial education training holds promise in combination interventions.

Meaux's review finds some evidence that financial education for children and youth has a modest,

positive association with change in financial knowledge, attitudes and behaviors. This is echoed by Lee et al. (2019) in their evidence review on financial education for HIV-vulnerable youth, orphans and vulnerable children (16 studies of 10 interventions). Some, but not all, of the studies reviewed focused on AGYW and the analysis does not separate findings for AGYW programs; findings from two AGYW-focused studies are included in Box 2. Lee et al's review examined studies that compared:

- financial education plus savings with financial education without savings (2 interventions),
- plural (financial and health education) interventions plus plural supports (self-efficacy supports and savings services) with health education or financial education alone (4 interventions, 1 also reported in financial education), and
- plural education (financial and sexual and reproductive health education) plus self-efficacy supports (but no savings) with health education alone or no intervention (5 interventions).

They found that both financial education and plural interventions showed at least one positive health or economic outcome. Financial education appeared to have positive effects on spending, risk preferences and savings behavior, but financial education and saving may substitute for, rather than complement, each other in terms of their effects on outcomes. Plural education plus savings and self-efficacy supports demonstrated improvements including HIV-related knowledge, attitudes, reduced sexual risk-taking behavior and improved self-efficacy, increased saving and improved attitudes toward saving. Plural education plus self efficacy supports without savings or other financial service

### Box 2. Learning from financial literacy « plus » interventions

A study on the Suubi-Maka project in Uganda found that a matched child savings account intervention with family-focused financial education, peer mentorship on life options, counseling on life skills and health education, plus provision of school supplies yielded significant increases in HIV-preventive attitude scores and youth savings behaviors (male and female adolescents aged 10-17) (Jennings, Ssewamala, and Nabunya 2015).

A study of an intervention with 14-20 year old AGYW in Uganda that included health education, financial education and vocational/skills education saw significantly improved HIV and pregnancy knowledge and behaviors and increased likelihood of engagement in an income-generating activity (IGA) (Bandiera et al. 2013, Bandiera et al. 2017).

A study on the Shaz! project in Zimbabwe, which offered AGYW an intervention that included life skills, health education, financial education, and vocational skills training for an IGA, saw reduced food insecurity, lower risk of transactional sex, higher likelihood of condom use, and fewer unintended pregnancies (Dunbar et al. 2014).

showed positive effects on HIV and self-efficacy outcomes. The reviewers reported that the studies reviewed often did not, or could not, clarify which project components led to favorable outcomes and

highlighted the need to disaggregate target groups (by age, gender and "type of orphan"), program components (for example, by setting and type of component) and individual and family characteristics. They also observe that asset pathways are not clear, details about self-efficacy are unclear and that self-efficacy is also linked to structural elements such as gendered social norms.

## <u>Vocational and entrepreneurial training may hold</u> promise, but caution and careful design are advised.

Tripney and Hombrados's (2013) meta-analysis of studies on vocational education and training (including technical education, vocational education, vocational training, on-the-job training, and apprenticeship training) reviews an evidence base the authors indicate is limited by size, quality, and geographic coverage (studies were mostly in Latin America and the Caribbean). The authors found some evidence that TVET improves the labor market situation of participants (particularly with respect to formal employment and monthly earnings), and inconclusive evidence of the effect of TVET on youth employment outcomes; they highlight the need for further research on multiple fronts (Tripney and Hombrados 2013).

Swann's (2018) review found positive or neutral outcomes with respect to vocational education and reduction in adolescents' self-reported HIV risk behaviors, with vocational training typically delivered and assessed in combination with

Box 3. AGYW in apprenticeship training

A World Bank study of an apprenticeship training program for young men and young women aged 15 to 24 in Malawi highlights design and operational considerations for successfully reaching AGYW with this type of program:

- stipends inadequate to cover transportation and lodging costs,
- female participants had to draw more heavily on their savings to participate and received less help from trainers, and
- female participants' heavier time burden of home and agricultural affected attendance.

For both young women and young men, location, accessibility and convenience were determinants of attendance and having friends or relatives close to the training site was a strong predictor of completion.

(Cho et al. 2013)

other interventions. Two studies included in the review found negative outcomes associated with entrepreneurship development activities in programs focused on AGYW: increased exposure to harassment and abuse in one and decreases in ability to refuse sex and in condom use in the other.

Adult savings can have positive effects in terms of asset building, household food security and possibly children's education. Meaux's review of the evidence for community-based savings interventions' effects on orphans and vulnerable children (2016) found some robust evidence indicating that participation in adult SGs may lead to increased domestic and business asset ownership and to increased household-level food sufficiency and dietary diversity (although how this affects children and AGYW is generally not investigated). Studies found positive or neutral effects on children's education access and retention. Research indicates that participation in savings groups alone does not affect health outcomes or spending, but there are indications that savings group participation in combination with training on caring for children may contribute to positive health outcomes.

## LEARNING FROM WORLD VISION'S STRENGTHENING COMMUNITIES THROUGH INTEGRATED PROGRAMMING (SCIP) PROJECT (2011-2015) IN MOZAMBIQUE

SCIP scaled up the combination social empowerment and economic Women First intervention and expanded it to include girls aged 13-17. Participants were trained in business skills and in door-to-door sales. Girls received household products to sell through "kits," which most commonly included soap and cooking ingredients, but higher-value products such as biscuits, rice, spaghetti and batteries were also available. Participants were expected to repay the cost of the kit from their profits, at which point they could receive a kit of higher value. After selling a third kit, participants were considered to have graduated and they received bicycles. In some communities, participants were connected to project-formed savings and credit associations.

SCIP aimed to reduce adolescent girls' vulnerability to HIV transmission and to encourage them to stay in school. In addition to the Women First business component, it used the Go Girls! life skills curriculum and a locally tailored gender-based violence curriculum. ASPIRES conducted a mixed-methods study to investigate whether the project reduced girls' vulnerability to HIV and to describe potential pathways or processes that contribute to the intervention's effect on girls' HIV vulnerability.

The study used a mixed-methods quasi-experimental design. The quantitative component of the evaluation did not find evidence of impact on the selected outcomes (Burke, Field, et al. 2019), but findings from the qualitative research suggested that the intervention enabled girls to earn money, supported some girls to continue attending school and encouraged some to aspire to higher education. The qualitative research also indicated that when girls had financial resources, sexual risk behaviors such as transactional sex and multiple partnerships decreased (Burke, Packer, et al. 2019). The study also identified limitations of the business component that diluted its effectiveness over the longer term. Girls and other community members reported that there was saturation of kit products in girls' communities. Girls said they struggled to make enough money to repay the value of kits and continue doing business, and they felt that the business component did not continue long enough. A similar program might address these challenges by extending the duration of the intervention, building girls' capacity to access and negotiate lower costs for kit inputs, and strengthening the savings component so that girls have financial reserves when business is slow or fails.

The qualitative research also highlighted an unanticipated impact of the project: that **it may have reinforced a pervasive set of social norms related to respect and girls' good behavior** (demonstrated by humility and deference, being productive and serving others, and being chaste and preserving a modest reputation) and appropriate work for women, to the detriment of other project goals including ability to negotiate condom use and refuse unwanted sex and girls' increased participation in household decision making. The study team recommends that programs conduct formative research on gender norms that may be detrimental to positive sexual and reproductive health outcomes and include program components that address these norms with the broader community (Lenzi et al. 2019).

### LEARNING FROM ASPIRES' ES AND HIV-PREVENTION INTERVENTION IN SOUTH AFRICA

ASPIRES South Africa project provided technical assistance to local implementing partners to deliver a combined ES and HIV prevention education to vulnerable adolescents and youth. The core interventions<sup>2</sup> were a financial education curriculum that emphasized savings skills and an HIV prevention education curriculum, both of which were tailored to the local context. ASPIRES conducted two studies on these core interventions: a randomized controlled trial and a separate mixed-methods evaluation, both of which were interested in the possible synergistic effects from combining the interventions. The RCT found that **youth savings**, **intention to save for their education**, **and HIV knowledge increased**, but did not find evidence of amplified effects from combining the interventions (Burke, Murray, et al. 2019).

The mixed-methods evaluation (Zisette et al., n.d.) found increases in the number of participants earning money, having a bank account, saving though other means, planning to go on to tertiary education, and feeling comfortable talking about condoms. Over half of the participants did not sexually debut in the study period and about half got HIV tested for the first time. Themes emerging from participant interviews about the effect of the intervention included avoiding dating to focus on education, improved relations and uptake of learning (including savings behaviors) at home, and unintended, likely synergistic effects associated with greater self-esteem and respect for others. Participants reported having more respect for themselves and making changes in relationships in their households and friend groups and at school, in keeping with new priorities for their lives.

# SEQUENCING ACTIVITIES IN A COMBINATION SOCIO-ECONOMIC INTERVENTION FOR ADOLESCENTS IN LEOSTHO

In Lesotho, 4Children is responsible for three DREAMS elements: social assets building for adolescents, strengthening families (including children) through social protection through savings groups and financial education delivered through DREAMS safe spaces, and strengthening families through parenting programs. DREAMS phase 1 experience suggested that results would be improved if the socio-economic and social assets building activities were delivered together. To do this, team members identified key outcomes for an HIV prevention-focused program and reviewed the curricula that had been used (Go Girls, Aflatoon, Aflateen, and SILC). Finding overlap between the curricula, they selected the activities they felt would be most exciting to participants and used them to develop an eight-week curriculum that begins with knowledge of the self and financial literacy, enables early development of SGs and includes HIV information, ES and social asset development in each session.

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<sup>&</sup>lt;sup>2</sup> The full ASPIRES South Africa economic strengthening package involved trainings in employability, entrepreneurship and access to tertiary education. It was not feasible to include all of the interventions in the evaluation, and they were also not as widely implemented as the core interventions.

Groups continue saving after the core content is completed (Long 2017).

The sequenced intervention has not yet been evaluated, but program documentation indicates that girls are saving. Anecdotal experience indicates that the social assets building and socio-economic components reinforce each other and that participants are developing life skills that can contribute to making healthy choices that may affect their HIV risk (Long 2017). Interestingly, the project found that the sequenced intervention improved retention of both younger adolescent girls and older adolescent girls and young women. Many participants in an earlier intervention phase, especially younger ones, had found the savings methodology boring. Young women had previously participated in savings groups, but dropped out of the social assets program component, losing exposure to HIV information and life skills activities. Dropout reduced in the sequenced intervention and practical savings in the sequenced intervention became the most popular element.

Week	Module	Source
1	Project introduction, HIV messaging and financial education, About me	Go Girls
2	Rights and responsibilities, Member responsibilities, His and Hers	Aflatoun, SILC, Go Girls
3	Speaking up, Making good decisions, Setting up a savings plan	Go Girls, Aflateen
4	Constitution, savings, safety of groups	SILC
5	SILC constitution	SILC
6	Sources of income, Written record keeping, SILC meeting procedure 1	Aflatoun, SILC
7	*Saving starts, Sexuality 1 and 2, My future 1 and 2	Go Girls
8	Social and financial enterprise, Community problems and solutions	Aflateen

### **DISCUSSION**

There is a growing evidence base around the importance of combination interventions, especially for highly vulnerable populations, but it is challenging to answer questions about evidence for layering or sequencing interventions, as the evidence base does not currently provide much insight. ASPIRES has done some investigation into program experience in graduation-oriented OVC programming and found a variety of approaches with little commonality among them, although some key factors for sustained outcomes did emerge: building an integrated approach, working with households through case management approaches, and building trust as a foundation step (Moret and Lorenzetti, n.d.). The best approach forward appears to be developing theories of change that are grounded in the evidence base for interventions that have demonstrated capability for change and whose effects appear to logically fit together. For instance, financial literacy may be a useful starting point, then adding in savings groups to help practitioners practice savings behavior, and introducing education around expenses that the program wants see increase, such as health insurance or access, or investments in girls' education.

Monitoring and evaluating future programs to capture pathways to effects and unintended consequences would add much to the evidence base. While full-factorial RCTs, such as were implemented under ASPIRES South Africa are the gold standard for evidence, our experience illustrates that systematic qualitative evidence adds substantial value in terms of understanding the effects of programming, as well. For complex programming scenarios, such as layered interventions, thoughtfully designed qualitative and mixed-methods evaluation approaches can illuminate trends and pathways that RCTs lack the capacity to capture and point to approaches that show promise.

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